

CERTIFICATE OF LIABILITY INSURANCE REQUEST

Fill in the appropriate information and email to Jennifer Howley at jhowley@risd.edu. For questions, please contact Jennifer at 454-6497.

A 24-hour weekday notice is requested.

Please note: the Risk Manager's office is not open on weekends.

Please issue a Certificate of Liability Insurance for the following.

Name of Event (required):

(e.g. Senior Show, Sculpture Exhibition, Boat Event)

Start Date of Event (required):

End Date of Event (required):

Location of Event (required):

(e.g. Building Name and Address, City Lot Number)

Certificate Holder:

(e.g. Company Name, Convention Center, City of City Name)

Do they require that we list them as additional insured?

Please list the name and email address of the person/dept. who is requesting the certificate.

NAME

EMAIL

PHONE NUMBER

Please attach a copy of any contract or agreement listing the certificate requirements.